

Utah's State Snapshots



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State Snapshots Web Conference

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Utah's Population Overview



- Population: 2,500,000+
- 76% live along the Wasatch Front
- Youngest population & highest birth rate
- Uninsured rate: 10.7% (2008)
- Medicaid enrolled: 240,000, or 9%
- Median household income: \$56,000 (13th)

Utah Health Data Authority Act



26-33a-104

The purpose of the committee is to direct a statewide effort to *collect, analyze, and distribute* health care data *to facilitate the promotion and accessibility of quality and cost-effective health care* and also to facilitate interaction among those with concern for health care issues. (adopted 1990)



Health Data Committee

Purchasers/Business

Clark Hinckley, Zions Bancorporation

Stephen Kroes, Utah Foundation

Jim Wall, Deseret News

Providers

Kim Bateman, M.D., Manti Medical Clinic and *HealthInsight*

Kevin Martin, R.N., Orem Community Hospital

Public Policy

Robert Huefner – Chair, Univ. of Utah, Political Sciences

Leslie Francis, Univ. of Utah, Health Ethics

Patients/Consumers

Gary Nordoff, Housing for Low Income People

Terry Haven, Voices for Utah Children

Bill Crim, United Way

Payers and Health Systems

David Call, Deseret Mutual Benefits Administration

Douglas Hasbrouck, Regence BC/BS of Utah

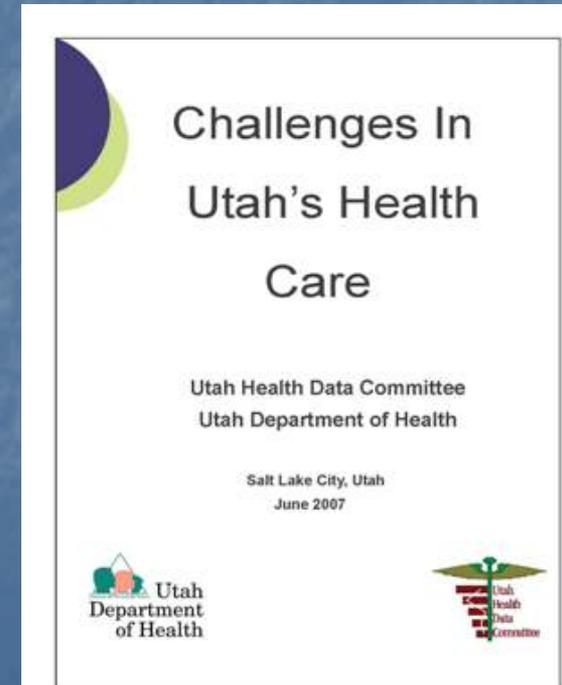
Greg Poulsen, Vice-chair, Intermountain Healthcare

Office of Health Care Statistics

- Established in 1990 as staff to the Health Data Committee
- Collects facility data on:
 - Hospitals
 - Emergency departments
 - Ambulatory surgery centers
- Collects quality data on:
 - HMOs
 - PPOs
 - Medicaid/CHIP
- All payer database

Reporting for Policymakers

- The big picture from a national perspective
- Comparative summary indicators
 - State ranking
 - Trend
- Multiple health settings
- Tie to state health priorities
- Identify emerging issues



UTAH Health News

Utah 1 of 8 States Rated "Strong" in New Health Care Report

June 11, 2007

The state of Utah performs well when it comes to overall health measures like quality, access and patient safety. Those measures put Utah in the top eight states according to a new report by the Department of Health & Human Services' Agency for Healthcare Research and Quality (AHRQ).

A closer look, however, points to areas where improvement is still needed, including the number of uninsured, breast and cervical cancer care and screenings, child immunization rates and providing needed care for children with chronic health conditions.

"We're understandably proud to again be named among the best states in the nation in health care," said Utah Department of Health (UDOH) Executive Director Dr. David Sundwall. "At the same time, we must find ways to get more of our babies immunized, our women better protected against cancer, and our sickest children the care they need."

The AHRQ study is summarized in the new UDOH report *Challenges in Utah's Health Care*. Prepared by the UDOH Health Data Committee (HDC), the report is an important tool for health care leaders and policymakers as they work to make improvements.

"We've struggled with our child immunization rates for years now," said HDC Consumer Representative and Voices for Utah Children advocate Terry Haven. "Despite very visible campaigns like *Immunize by 2, It's Up to You*, our data still show a need for improvement," she said. "Reports like this are a critical way to prompt those in power to take actions like continuing and increasing funding for outreach efforts, addressing access issues in our rural areas, and educating parents about the importance of immunization."

According to the *Challenges* report, seven of the report's sixteen health care measures are trending in the wrong direction and need improvement. For example, challenges are found in getting Utahns to take advantage of preventive screenings, like those available for cervical, breast and colorectal cancer, as well as for sexually transmitted diseases like chlamydia. As indicated in the following chart, Utahns fall behind far behind when it comes to getting tested.

	Received Care
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UDOH released the report on the same day as AHRQ released their National Healthcare Quality Report.

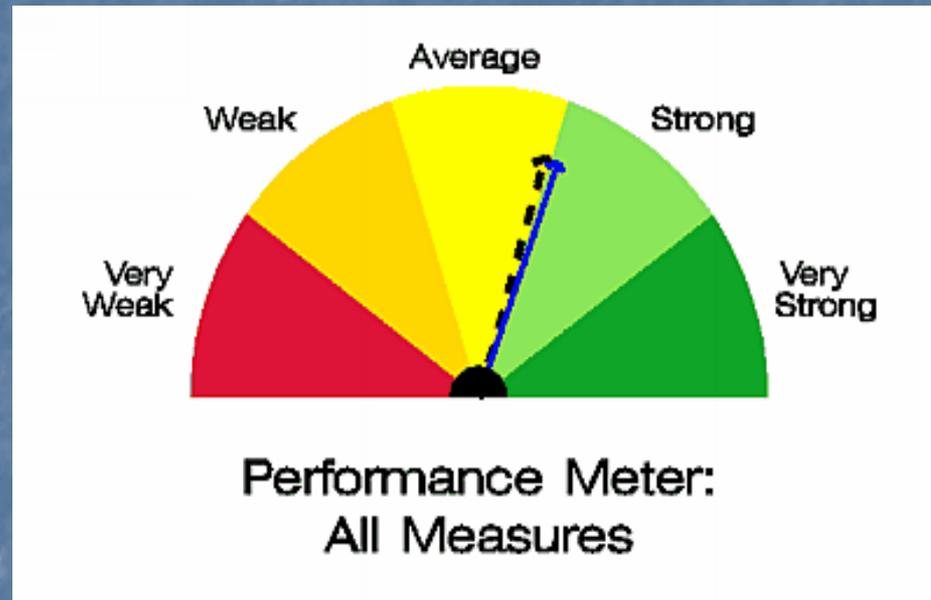
Report Indicators from AHRQ

16 summary indicators in the report:

- 13 used national data or methods
 - 8 – AHRQ
 - 2 - CMS Health Care Expenditure Report
 - 1 - NCHS Hospital Survey
 - 1 - NCQA HEDIS
 - 1 - United Health Foundation
- 2 used Utah data and NYU methods (Access)
- 1 used Utah data and methods (Rx data)

Utah's Overall Health Care Quality Performance Compared to All States

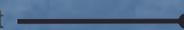
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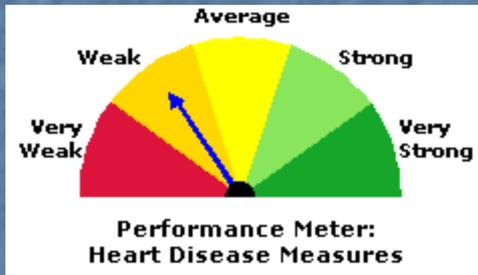
Base Line



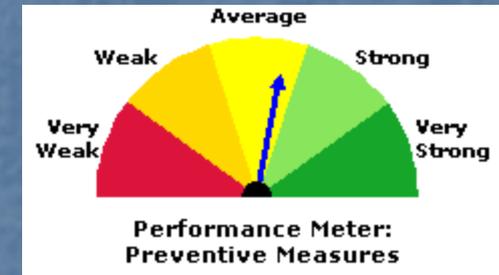
Current



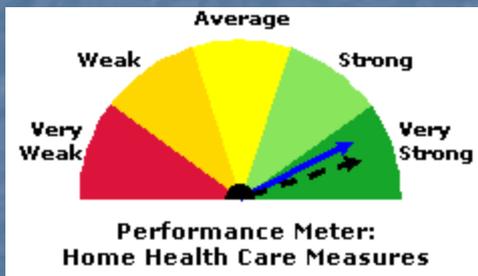
Highlighting Strengths and Weaknesses



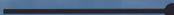
Low-performing measures can be targeted for improvement



Average measures should be watched for trends



These measures may show what we're doing right

Base Line  Current 

Why is Utah's Health Care Moving in the Right Direction?

◆ Utah has strong health care systems. Good and stable performance is observed in all areas of quality, patient safety, access, and cost .

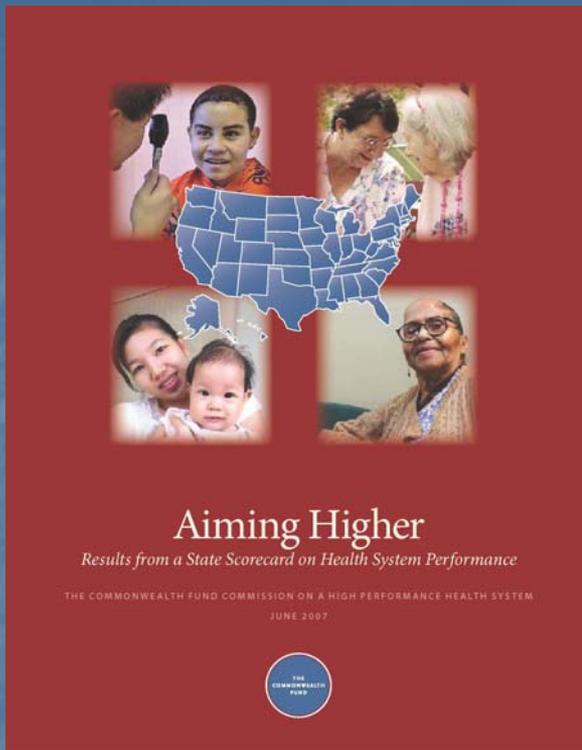
Trend	Area	Highlights
	Quality / Patient Safety	<p>Overall health care quality ranked as “Strong” (p. 9)</p> <p>Established baseline measures for hospital patient safety (p. 11)</p>
	Access	<p>Decline in uninsured ED visits for primary care sensitive conditions (PCSC) but increased % of visits for the general population, 2001 to 2005 (p. 17)</p> <p>Stable hospitalization rates for ambulatory care sensitive conditions over past decade (p. 18)</p>
	Cost	<p>Decline in proportion of personal health care expenditures for hospitals and nursing homes and increased proportion of expenditures for home health care, 1980 to 2004 (p. 21)</p> <p>Slower increase in median charge for hospitalizations over 2004 but similar to the national trend (p. 23)</p> <p>Stable utilization rates of hospitals, emergency departments, and outpatient surgery centers, 1999 to 2005 (p. 24)</p>

Summary Indicator Tables

Challenges in Utah's
Health Care Report

State Ranking Dynamics

- Commonwealth Fund Health System Report Card (2007), released 06/13/07



Rank	Access	Quality	Avoidable hospital use & cost	Equity	Healthy lives
Utah	38	48	1	42	1

Ranking Dynamics (cont.)

- Dr. Sundwall, Exec. Director led the investigation
 - Are the **data** comparable?
 - Are the **methods** comparable?
 - Are the **indicators** comparable?
 - What can we learn from the Commonwealth Fund report?
- The Utah Medical Ethics Committee (UMEC) had a rich discussion on August 28, 2007



UMEC Summary

- The distinction between outcome measures and process measures was evident in the various ranking schemes.
- The nation seems to be at a point where our measure definitions are standardized but the validity of each specific measure can't be taken for granted.

Take Home Message:

- Interaction between policymakers and analysts is the starting point for evidence-based policymaking
- Fully explore the State Snapshots to understand the indicators and methods
- Play with AHRQ's other tools, such as HCUPnet, to find additional data
- Ask AHRQ for technical assistance if HCUPnet doesn't have the data you need

Thank You!

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